

ALLEGATION FORM REGARDING VIOLATIONS OF CHAPTER 305 – LOBBYING ORDINANCE

OFFICE OF THE CITY CLERK LICENSE DIVISION 200 E. WELLS ST. ROOM 105, MILWAUKEE, WI 53202 Telephone:(414) 286-2238 E-MAIL ADDRESS: LICENSE@MILWAUKEE.GOV Website: www.milwaukee.gov/lobby

A copy of this complaint will be provided to the person or firm you are complaining against.

Your Name:		
First MI	Last	
Street Address:		
City: State: Zip:		
Firm and/or Person's complaint i	 is against:	
Firm/Person's Name:		
Address:		
City: State: Zip:		
Phone: ()		
Please explain the specific circums pages if necessary:	stances surrounding	your complaint, attach additional
SUBSCRIBED AND SWORN TO BEF	ORE ME THIS	
day of	20	
		Signature of Complainant
Notary Public, State of Wisconsin My Commission expires		
Office Use Only Initials: Transaction #:	Data & Tima Stamp	
Date and Time Forwarded to City Attorney	•	
Date and Time Forwarded to Accused:		